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Substitute for Form PTO-875 OTHER THAN												THAN
	CLAIMS AS FILED - PART I (Column 1) (Column 2)						-	SMALL E	NTITY	OR	SMALL ENTITY	
FOR NUMBER FILED			FILED	NUMBER EXTRA			RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a)) (\$	OR		\$
H	OTAL	CLAIMS	40	40 minus 20 =				x s=		OR	x s=	
H	NDEP	R 1.16(c)) ENDENT CLAIMS	+ /	minus 3			-	x \$=		OR	x s=	
\vdash		7 CFR 1.10(0))			CFR 1.16(d))			+ 5 =		OR	+ \$=	
MOLTIPLE DEPENDENT OF WILLY NESSAY								TOTAL		OR	TOTAL	
If the difference in column 1 is less than zero, enter "0" in column 2.												
	CLAIMS AS AMENDED - PART II										OTHE	R THAN
١	u	15/22	(Column 1)	Column 1)		(Column 3)		SMALL E	ENTITY	OR •		ENTITY
+	#	1000 T	CLAIMS REMAINING		HIGHEST NUMBER	PRESENT		RATE	ADDI-		RATE	ADDI- TIONAL
١			AFTER AMENDMENT		PREVIOUSLY PAID FOR	EXTRA .			TIONAL FEE			FEE
	DMEN	Total	·	Minus	40	=		x \$=		OR	× \$=	
1	END END	(37 CFR 1.16(c)) Independent	. 9	Minus	"" 9	=		x s =		OR	x \$=	
١	AME	(37 CFR 1.16(b))	TION OF MULTIPLE	- DEDENDE	NT CLAIM (37 CE	R 1.16(d))		+ \$ =		OR	+ \$=	
-	4	FIRST PRESENTA	TION OF MULTIPLE	DEPENDE	141 0074111 (01 01		1	TOTAL		OR	TOTAL ADD'L FEE	17
ļ	/ /							ADD'L FEE	L	J	7,000	7
-	2/4	0/02	(Column 1)		(Column 2) HIGHEST	(Column 3)	1		Γ	7	SATE	ADDI-
١	6		CLAIMS REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	TIONAL FEE
١	닒		AMENDMENT	16:000	PAID FOR	=	1		FEE	-		1
١	ENDMEN	Total (37 CFR 1.16(c))	. 29	Minus	40	=	-	× \$=	-	OR	x \$=	
١	EN I	Independent (37 CFR 1.16(b))	· 5	Minus	9		1	x \$=	 -	OR	x s=	1-/-
1	AM	FIRST PRESENT.	ATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 C	FR 1.16(d))		+ \$=	<u> </u>	OR	+ \$=	 /
		1 1						TOTAL ADD'L FEE		OR	ADD'L FEE	/
5.5	1	18/03				-						
	<i>(</i>		(Column 1) CLAIMS	T T	(Column 2) HIGHEST NUMBER	PRESENT	1	RATE	ADDI-		RATE	ADDI- TIONAL
_	-		REMAINING AFTER AMENDMENT	Ì	PREVIOUSLY PAID FOR	EXTRA			TIONAL FEE			FEE
٦	鱼	Total	* 23	Minus	29	=	1	x \$=		OR	x \$=	
1	AMENDMEN	(37 CFR 1.16(c)) Independent	. 3	Minus			7	x \$=		OR	x \$=	/
	ME	(37 CFR 1.16(b))		I C DEDENIO	DENT CLAIM (37.0	CFR 1.16(di)	1	+s =		OR	+ \$=	
	<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						TOTAL		OR	TOTAL ADD'L FEE	17
		4 : the thought of entry in column 2, write "0" in column 3.						ADD'L FEE	L	``		
	* If the entry in column 1 is less than the entry in Column 1 is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.